

By: Frank

H.B. No. 633

A BILL TO BE ENTITLED

AN ACT

relating to the method of payment for certain health care.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Chapter 1204, Insurance Code, is amended by adding Subchapter G to read as follows:

SUBCHAPTER G. DIRECT PAYMENT OF PHYSICIAN OR HEALTH CARE PROVIDER

Sec. 1204.301. DEFINITIONS. In this subchapter:

(1) "Enrollee" means an individual who is enrolled in a health benefit plan or otherwise entitled to coverage under a health benefit plan.

(2) "Health benefit plan" means an individual, group, blanket, or franchise insurance policy, a group hospital service contract, or an individual or group subscriber contract or evidence of coverage issued by a health maintenance organization, that provides benefits for health care services.

(3) "Health care provider" means a person who provides health care services under a license, certificate, registration, or other similar evidence of regulation issued by this or another state of the United States.

(4) "Health care service" means a service to diagnose, prevent, alleviate, cure, or heal a human illness or injury that is provided to an individual by a physician or other health care provider.

(5) "Physician" means an individual licensed to

1 practice medicine in this or another state of the United States.

2 Sec. 1204.302. APPLICABILITY TO CERTAIN PLANS. In addition
3 to the health benefit plans described by Section 1204.301,
4 notwithstanding any other law, this subchapter applies to:

5 (1) a basic coverage plan under Chapter [1551](#);

6 (2) a basic plan under Chapter [1575](#);

7 (3) a primary care coverage plan under Chapter [1579](#);

8 and

9 (4) a plan providing basic coverage under Chapter
10 [1601](#).

11 Sec. 1204.303. PAYMENT IN LIEU OF CLAIM FOR BENEFITS; OTHER
12 DIRECT PAYMENTS. (a) A physician or health care provider may not
13 be prohibited from accepting directly from an enrollee full payment
14 for a health care service in lieu of submitting a claim to the
15 enrollee's health benefit plan.

16 (b) Notwithstanding Section [552.003](#) or any other law, the
17 charge for a health care service for which a physician or health
18 care provider accepts a payment as described by Subsection (a) or
19 from a patient without a health benefit plan may not exceed the
20 lowest contract rate for the health care service allowable under
21 any health benefit plan with respect to which the physician or
22 health care provider is a contracted, preferred, or participating
23 provider.

24 SECTION 2. This Act takes effect September 1, 2023.